PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999 C9/483 7.19													
CLAIMS AS FILED - PART I (Column 1) (Column 2)										ENTITY	OR	OTHER SMALL	
FC	PO1/14/9	0	NUMBER FILED			NUMBER EXTRA			ATE	FEE	1 - [RATE	FEE
BASIC FEE										345.00	OR		690.00
TOTAL CLAIMS			12	minus :	20=	•	×	\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			2	minus	3 =	•			(39=		OR	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT									130=				
• It	* If the difference in column 1 is less than zero, enter "0" in column 2									ļ	OR	+260=	
"											OR	•	690
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									AALL	ENTITY	OR	OTHER SMALL I	B
AMENDMENT A		REM Al	AIMS AINING FTER NOMENT		Pf	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 23		Minus **		20	= 3	X	\$ 9=		OR	X\$18=	54
	Independent	· 8		Minus		S CLAIM	= 5	×	39=		OR	x ≱ 8=	430
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									30=		OR	+260=	
02/02/05 (Calumn 1) (Calumn 2) (Calumn 3)											OR	TOTAL ADDIT, FEE	ed.
	0409	(Col	<u>umn 1)</u>		(0	Column 2)	(Column 3)	~00	IT. FEE		9 '		,
AMENDMENT B		REM Al	AIMS IAINING FTER NOMENT		Pf	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• 7	3	Minus	**	23	= 0	×	\$ 9=		OR	X\$18=	
AME	Independent	٠	8	Minus ••		8	×	39=		OR	X78=		
	FIRST PRESE	NTATIC	ON OF MU	JLTIPLE DEF	ENE	ENT CLAIM			20			000	
								<u> </u>	30= TOTAL		OR	+260= TOTAL	
	06/01	05							T. FEE		OR	ADDIT. FEE	ک
_		_(Col	umn 1) AIMS	Sec. Const.		Column 2) HIGHEST	(Column 3)				t 8		
AMENDMENT C		REM Al	AINING TER IDMENT		Pf	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 5	3	Minus	••	23	= -	X	9≃ -		OR	X\$18=	
	Independent	•	8	Minus	***	8	= 🕢	X	39≈			X78=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR		
٠,	f the entry in colu	mn 1 ie l	less than th	e entry in colu	mn 2	. write "O" in col	umn 3	<u> </u>	30=		OR	+260=	
**	If the "Highest Nu	mber Pr	eviously Pa	id For IN THI	SSP	ACE is less that	n 20, enter "20."		TOTAL T. FEE		OR	TOTAL ADDIT. FEE	4
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

DATE	IT ADDI	LOATI	_	Application or Docket Number											
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2004											09/483759				
CLAIMS AS FILED - PART I (Column 1) (Column 2)									E [NTITY	OR	OTHE	R THAN ENTITY		
FOR 0109	106	NUMB	NUMBER FILED			NUMBER EXTRA				FEE		RATE	FEE		
BASIC FEE										395.00	OR				
TOTAL CLAIMS		2	5 minu	s23	• 2			x\$11:			1	x\$22=			
INDEPENDENT	CLAIMS	7: minus 8			. 0			x41=	+		OR		100		
MULTIPLE DEF	ENDENT C	LAIM PRE							_		OR	x 82=			
* If the difference		+135	=		OR	+270=									
* If the difference in column 1 is less than zero, enter "0" in column 2									L		OR	TOTAL	PS		
03/200 CLAIMS AS AMENDED - PART II											_	OTHE	7 R THAN		
		lumn 1)	To the second se		olumn 2)	(Column 3)	•	SMA	LL E	NTITY	OR		ENTITY		
Total Independ	REM Al	AIMS IAINING TER NOMENT		NI PRE	GHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA		RATE	1	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE		
Total	. 5	5	Minus	**	25	= 7		x\$11=	1		OB	x\$22 =			
Independ	ent *	7.	Minus	***	7	= 0		x41=			OR	x 82=	· 1		
FIRST P	RESENTA	TION OF	MULTIPLE	MULTIPLE DEPENDENT CLAIM					-		OR	+270=			
	(Column 1) (Column 2) (Column 3							TOTA DDIT. FE			OR	TOTAL ADDIT. FEE	Ð		
ENT B	REM AF	AIMS AINING TER IDMENT		· NU PRE	GHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA	8	RATE		ADDI- IONAL FEE	to an included the control of control of	PELANI RELANI RATEIR WARNON	CADDI- TIONAL		
Total	*		Minus	**		=		x\$11=	=		OR	x\$22=			
Total	ent *		Minus	***		= '		x41=		-	OR	x 82=			
FIRST P	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR	+270=			
	(Col	umn 1)		(C	olumn 2)	(Column 3)	A	TOTA ODIT. FE			OR	TOTAL ADDIT. FEE			
Total Independ	REM AF	AIMS AINING TER IDMENT		NU PRE	GHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA		RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE		
Total	•	•	Minus	••	· .	=		x\$11=	=		OR	x\$ 22=			
Independ	ent *		Minus		=			x41=			OR	x8 2=			
FIRST P	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135=											+270=			
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in										OR.	TOTAL ADDIT. FEE				